

**Module E Section 1**  
**Ethics and Professionalism**  
**Quiz**

We began this section by saying that there are no clear answers when it comes to ethical questions; however, based on your readings throughout all of the previous modules, choose the answer that **best** reflects the philosophy of the “My Voice, My Choice” training course.

1. In this section, you read about Jeff Kerwin, a man who died at age 37. Some might say he died from a heart attack. Others might say he slowly committed suicide over a number of years because he chose to disregard what his body needed in order to be healthy. As Jeff’s Support Broker, what description best matches the philosophy of self-directed supports and ethics as presented in this section.
  - A. Jeff’s death is primarily because of his weight ballooning out of control. I believe it is appropriate and necessary to step in and provide control upon his eating choices, time and amounts of eating. I would discuss the legal options open to his parents or support system to assume decision-making for his medical care. Jeff does not have the ability to make his own decision to end his life.
  - B. When Jeff began to gain weight and not take care of himself, I told him I would only work with him if he would agree to abide by three rules. If he broke any one of the rules, that meant I would quit. The three rules were: 1) attend all scheduled medical appointments, 2) keep a diet log, and 3) take all medicines as prescribed – he could not quit taking a medicine without his doctors’ permission. It only took a week for Jeff to break a rule and that is when I quit. If he wanted my help, he would have done what I asked.
  - C. Jeff and I talked about his feelings and thoughts. He even asked what I thought about his weight and disability. I was honest. I told him that his weight put him at serious health risk and that I thought he needed more support to help curtail his eating, boost his activity, and find a replacement for food as a source of pleasure. I told him that it was also frustrating when he left a program we set up together or he refused to see his doctor. Jeff and I continued to talk about what options might work for him. It was difficult at those times when he would not follow-through. As Jeff’s family struggled, I tried to find resources for them to read and support groups where they might find solutions or solace. I do not know if what we did as a group was correct or not.
  - D. Jeff needed someone to hold the medical community responsible for their lack of attention to his problems and needs. They did not listen to me regarding Jeff’s needs and his inability to follow-through with medical treatment. Why did not they consider other ways to suppress his appetite

or schedule him for a surgical intervention – like gastric by-pass or something? This was just wrong!

2. As a Support Broker, how would you define RESPECT of your employers' Self-Determination?
  - A. Deference: politely yielding to the opinions, wishes, or judgment of another person; submitting to another.
  - B. Honoring: to act with esteem for another's wishes, opinions, judgment, or experience.
  - C. Obedient: complying with the wishes, orders, or instructions of one in authority.
  - D. Leading: providing an example for you to follow in all situations.
  - E. All of the above.
  
3. Support Brokers will frequently have the opportunity to refer employers to individuals who live in the community for support. Consider the following situation:

In small towns across Idaho, some of the best Support Brokers will already be active community members. They will know everyone! They will be members of different groups (i.e. fraternal organizations, church groups, volunteer organizations, art events, sporting teams). When it comes to creating relationships and provider resources for their employers, the Support Broker can rely on their own are friends, colleagues and even their own family members to be providers of services. Once the Support Broker has a pool of possible support providers they understandably refer to those providers first. It is important for the Support Broker to network in this way. What is wrong with this description?

  - A. The focus seems to be on the Support Broker being the center of developing providers – where is the discussion of employer preference, needs or wants?
  - B. Although it might be easier to create a pool of providers from which to choose, placing **ease** above all else is inappropriate and unprofessional.
  - C. The use of a member of the Support Broker's family as a provider may be considered unethical. Referring an employer to members of one's own family could be seen as a conflict of interest because the Broker could gain either in stature or financially from such an arrangement.
  - D. All of the above.
  - E. Only C is wrong

4. In this section, you were introduced to Jeffrey, a fifty-two year old man who recently told you about his experience of being abused at his church many years ago. There are a number of difficult considerations to Jeffrey's story including:

As his Broker, you felt closer to him because of your shared values when it comes to your faith. How does this situation affect his faith, and subsequently, yours?

As a professional in the service field, you know that the laws regarding needing to act upon a report of abuse are written in stone. Do you have to report this to authorities? Does his age make a difference? Do you know at this point who the perpetrator was? Who do you ask?

Jeffrey has asked you not to discuss this situation with anyone, particularly those within his Circle of Support. Because Jeffrey no longer wishes to attend church services or activities, a substantial part of his plan for community involvement is now nullified. How can you facilitate this change without discussing the reasons for the change?

Choose the answer which best describes a professional course of action to take.

- A. I would talk to Jeffrey. It may take more than one conversation to make sure I understand what is important to him and for him and me to decide how to proceed. I would probably continue to encourage Jeffrey to be open with his Circle of Supports; minimally he and I will have to come to some kind of understanding regarding communicating about his decision to leave the church and why he did so. I would probably ask him to seek counseling and potentially advise from the church community itself. Because Jeffrey is an adult, I am not under any obligation to share this historic abuse with authorities. But I might explore the possibility with Jeffrey.
- B. I believe the most pressing issue is the report of past abuse that Jeffrey made to me. I feel I must contact the authorities to report it whether Jeffrey wants me to or not. Although I do not know when this happened, the frequency, or how old Jeffrey was at the time, it is better to be safe rather than sorry. If the authorities want to follow up on it, they can. If they do not wish to follow up, at least I will not be liable.
- C. I am confused by Jeffrey's unwillingness to talk with his Circle of Support. He has always been open with them and has appreciated their input. I think it would be best to call for a meeting and I can help Jeffrey to understand that his Circle of Support is there for him no matter what.

Perhaps if all of us work together to get Jeffrey to understand we only have his best interests at heart, it would make him feel better. I think Jeffrey is afraid of their reaction to what happened so many years ago. It may help him if I break the news to them ahead of time.

- D. As a Support Broker, I did not sign up for getting involved in some long drawn out legal battle over some supposed abuse situation. I will likely tell Jeffery that his issues are too difficult to manage and I can not turn against the church. I will go to the church and let them know what Jeffery is saying, and I will resign my position with Jeffery and be more careful in my future selection of clients.

- 5. How will you, as a Support Broker, respond when your employer tells you of past experiences with professionals who acted unprofessionally or inappropriately towards them?

- A. This happens to me all the time and I nod a lot and try to change the subject. There is nothing I can say to make them feel better about that old provider, so why try?
- B. I think a lot of people with disabilities complain about their providers as something to do or talk about. I cannot imagine that anyone in this field would ever do such a thing on purpose, so usually it is more miscommunication or misunderstanding that is to blame. I think it is important to listen, but they at least need to hear the other side of how hard it is for providers.
- C. It is important for me to actively listen to what my employer is saying. By listening, I can identify what issues are important to her and it gives me an idea of what may be influencing her decision-making on certain issues. If my employer asks what I would have done in that situation, the best thing I can do is assure her that what is important to me is what she wants and needs today. As her advocate, I will continue to listen. If the stories continue, I may ask if she feels that seeing a counselor might help her get through her past.
- D. I believe that people with disabilities have often been victims of irresponsible behavior by providers and those providers should be reported to their licensing boards or Health and Welfare. I would also encourage my employer to press charges both on the system and the previous providers. This kind of situation is an outrage. I will fight it with everything I have and will encourage my employer to fight it as well.